

**APPLICANT INFORMATION**

Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Personal E-mail Address: \_\_\_\_\_

Expected Move-In: Fall 2010 or Spring 2011 (circle one)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/19

School Attending: \_\_\_\_\_ Gender \_\_\_\_\_

Student Status:       Current Undergraduate Student     Macaulay Honors       Current Graduate Student  
 Incoming Freshman     Incoming Transfer Student     NSE Program     Incoming Graduate Student

**PARENT/GUARDIAN/EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**TERMS AND CONDITIONS**

Applicant understands that if, at any time, there are vacant beds in the applicant's assigned apartment, The Summit reserves the right to assign roommates without prior notice and/or relocate the applicant (named above) to another unit. Applicant further understands that roommate compatibility is not guaranteed and that roommate conflicts are not acceptable reasons to terminate a license. Applicant represents that all of the above information is true and complete and authorizes the verification of same by reasonable means. Any misrepresentation or omission may be cause for the rejection of this application and/or the termination of the Housing License Agreement. Applicant further authorizes free exchange of information between Queens College of the City University of New York and The Summit staff, including but not limited to the applicant's student status, academic records, judicial records, and financial records to be used to determine whether this application shall be approved or disapproved. Applicant understands and agrees that a reservation payment in the amount of \$400.00 must accompany the Housing Application, and failure or refusal to promptly provide this payment may result in the cancellation of this application and any resultant Housing License Agreement. Applicant agrees that the reservation payment will be applied to the first semester payment of the Housing License Agreement. The acceptance of a reservation payment does not constitute a guarantee of admission to Queens College or a guarantee of a housing assignment.

All applicants have forty-eight (48) hours from submission of the Housing License Agreement to request cancellation and be entitled to a full refund of the \$400 reservation payment. Reservation Fee payment (\$400) is also refundable if applicant applies and fails to be assigned a space in The Summit, admitted to Queens College or the CUNY institution within commutable proximity (as determined by The Summit). Applicant will allow several weeks for any refunds to be processed. After the initial 48 hours, the \$400 reservation payment will be forfeited to The Summit by any eligible applicant (eligibility defined as admitted by Queens College and/or a CUNY institution within commutable proximity (as determined by The Summit)) who either fails or refuses to enter into a Housing License agreement, even if the applicant does not attend the aforementioned CUNY institution. Housing License Cancellation prior to occupancy (occupancy defined as resident receipt of a key) will be accepted subject to charges as follows, provided written notification is received in The Summit Office prior to July 1, 2010. Cancellations prior to occupancy and received on or before July 1, 2010 will result in forfeiture of the \$400 reservation payment plus the assessment of \$1,000 cancellation fee. Cancellation prior to occupancy after July 1, 2010 will result in full Housing payment due and payable as stated in the License Agreement. Once an assigned and licensed resident accepts a key for an assigned space in The Summit, all payments are due per the payment schedule as stated in the Housing License(s), regardless of cancellation.

I, the Undersigned Applicant, have read and agree to all terms and conditions set forth in this application. I understand that this application is part of my Housing License Agreement, especially those areas regarding earnest monies.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

